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Attorneys for Debtor

IN THE UNITED STATES BANKRUPTCY COURT  
IN AND FOR THE DISTRICT OF ARIZONA


In re  
STARSHINE ACADEMY,  
  
Debtor.

No. 2: 16-01803-SHG  
  
CHAPTER 11  
  
NOTICE OF FILING SCHEDULES  
D, E AND F

COMES NOW the Debtor, by and through its attorneys undersigned, and herein provides notice of the filing of Schedules D, E and F. Attached as Exhibit A are such Schedules D, E and F.

RESPECTFULLY SUBMITTED this 14<sup>th</sup> day of March, 2016.

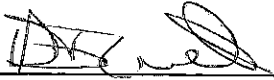
CARMICHAEL & POWELL, P.C.

By   
Donald W. Powell  
7301 North 16<sup>th</sup> Street, #103  
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(602) 861-0777

1 COPY of the foregoing sent electronically this  
2 14<sup>th</sup> day of March, 2016, to:

3 Jennifer A. Giaimo  
4 United States Trustee  
5 230 North First Avenue, #204  
6 Phoenix, Arizona 85003  
7 Jennifer.A.Giaimo@usdoj.gov

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## **EXHIBIT A**

**Fill in this information to identify the case:**Debtor name **STARSHINE ACADEMY**United States Bankruptcy Court for the: **DISTRICT OF ARIZONA**

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing**Official Form 206D****Schedule D: Creditors Who Have Claims Secured by Property**

12/15

Be as complete and accurate as possible.

**1. Do any creditors have claims secured by debtor's property?**☐ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.☒ Yes. Fill in all of the information below.**Part 1: List Creditors Who Have Secured Claims****2. List in alphabetical order all creditors who have secured claims.** If a creditor has more than one secured claim, list the creditor separately for each claim.

Column A

Column B

Amount of claim

Value of collateral that supports this claim

Do not deduct the value of collateral.

**\$12,700,000.00****2.1 The Industrial Development Authority of**

Creditor's Name

**the County of Pima, c/o Russo, Russo & Slania, PC, 6700 N. Oracle Road, Ste. 100 Tucson, AZ 85704**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

☒ No☐ Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien

**Real property and personal property at 3535 E. McDowell Road, Phoenix, AZ**

Describe the lien

Is the creditor an insider or related party?

☒ No☐ Yes

Is anyone else liable on this claim?

☒ No☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed**3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.****\$12,700,000****Part 2: List Others to Be Notified for a Debt Already Listed in Part 1**

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to be notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

Name and address

On which line in Part 1 did you enter the related creditor?

Last 4 digits of account number for this entity

**BOKE, N.A. dba Bank of Arizona  
c/o Brenda Black  
301 E. Camelback Road  
Phoenix, AZ 85016**Line **2.1**

**Fill in this information to identify the case:**Debtor name **STARSHINE ACADEMY**United States Bankruptcy Court for the: **DISTRICT OF ARIZONA**

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing**Official Form 206E/F****Schedule E/F: Creditors Who Have Unsecured Claims**

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with **PRIORITY** unsecured claims and Part 2 for creditors with **NONPRIORITY** unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part Included in this form.

**Part 1: List All Creditors with PRIORITY Unsecured Claims****1. Do any creditors have priority unsecured claims?** (See 11 U.S.C. § 507).☐ No. Go to Part 2.☒ Yes. Go to line 2.**2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part.** If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

			Total claim	Priority amount
2.1	Priority creditor's name and mailing address <b>Internal Revenue Service P.O. Box 7346 Philadelphia, PA 19101</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$70,000.00</b>	<b>\$70,000.00</b>
	Date or dates debt was incurred	Basis for the claim: <b>Withholding taxes</b>		
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)			
2.2	Priority creditor's name and mailing address <b>State of Arizona Dept. of Revenue 1600 W. Monroe Phoenix, AZ 85007</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$10,000.00</b>	<b>\$10,000.00</b>
	Date or dates debt was incurred	Basis for the claim: <b>Withholding taxes</b>		
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)			

**Part 2: List All Creditors with NONPRIORITY Unsecured Claims****3. List in alphabetical order all of the creditors with nonpriority unsecured claims.** If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

Amount of claim

Debtor **STARSHINE ACADEMY**  
Name

Case number (if known)

3.1	Nonpriority creditor's name and mailing address <b>3 Oaks Resource Group International</b> <b>P.O. Box 565492</b> <b>Pinecrest, FL 33256</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u><b>Furniture</b></u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$2,807.73</b>
3.2	Nonpriority creditor's name and mailing address <b>ADE</b> <b>Attention: Stephanie L. Long</b> <b>1535 W. Jefferson, Bin 41</b> <b>Phoenix, AZ 85007</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u><b>Seminars</b></u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$4,680.00</b>
3.3	Nonpriority creditor's name and mailing address <b>Andy Klunk</b> <b>c/o Nicholas Enoch</b> <b>349 N. 4th Avenue</b> <b>Phoenix, AZ 85003</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u><b>Judgment</b></u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Unknown</b>
3.4	Nonpriority creditor's name and mailing address <b>Apex Learning</b> <b>1215 Fourth Avenue, Ste 1500</b> <b>Seattle, WA 98161</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u><b>Online Education</b></u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$19,562.50</b>
3.5	Nonpriority creditor's name and mailing address <b>Arizona Charter Schools Assoc.</b> <b>7500 N. Dreamy Draw Dr., Ste. 220</b> <b>Phoenix, AZ 85020</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u><b>Dues</b></u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$3,634.50</b>
3.6	Nonpriority creditor's name and mailing address <b>Arizona State Retirement System</b> <b>3300 N. Central Avenue</b> <b>Phoenix, AZ 85012</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u><b>Retirement</b></u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$25,000.00</b>
3.7	Nonpriority creditor's name and mailing address <b>Arizona West Valley Catering</b> <b>9299 W. Olive Ave., Ste. 113</b> <b>Peoria, AZ 85345</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u><b>School Lunches</b></u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$10,097.92</b>

Debtor **STARSHINE ACADEMY**  
Name

Case number (if known)

3.8	Nonpriority creditor's name and mailing address <b>Assessment Technology</b> <b>6700 E. Speedway Blvd.</b> <b>Tucson, AZ 85710</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>Testing</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$2,000.00</u>
3.9	Nonpriority creditor's name and mailing address <b>ASU SKYSONG</b> <b>Attention: Accounting</b> <b>1475 N. Scottsdale Rd., Ste. 200</b> <b>Scottsdale, AZ 85257</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>Commercial Lease</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>Unknown</u>
3.10	Nonpriority creditor's name and mailing address <b>AZ AEC</b> <b>Arizona Alternative Education Consortium</b> <b>4744 W. Grovers</b> <b>Glendale, AZ 85308</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>Services</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$50.00</u>
3.11	Nonpriority creditor's name and mailing address <b>Backbone Communications</b> <b>5025 N. Central Avenue, #422</b> <b>Phoenix, AZ 85012</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>Online Education</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$10,547.00</u>
3.12	Nonpriority creditor's name and mailing address <b>Baisz</b> <b>4825 E. Roosevelt St.</b> <b>Phoenix, AZ 85008</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>School Bus Rental</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$468.00</u>
3.13	Nonpriority creditor's name and mailing address <b>Berridge Nurseries</b> <b>4647 E. Camelback Road</b> <b>Phoenix, AZ 85018</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>Product</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$210.19</u>
3.14	Nonpriority creditor's name and mailing address <b>BlueTek</b> <b>3229 E. Washington</b> <b>Phoenix, AZ 85034</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>Printing</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$56.86</u>

Debtor **STARSHINE ACADEMY**

Name

Case number (if known)

3.15	Nonpriority creditor's name and mailing address <b>CAA</b> <b>2909 N. 113th Lane</b> <b>Avondale, AZ 85392</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u><b>Services</b></u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,720.00</b>
3.16	Nonpriority creditor's name and mailing address <b>Capitol Litho Printing</b> <b>2301 North 16th Street</b> <b>Phoenix, AZ 85006</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u><b>Printing</b></u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$444.03</b>
3.17	Nonpriority creditor's name and mailing address <b>Center for Education Law</b> <b>P.O. Box 3008</b> <b>Malvern, PA 19355</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u><b>Text Books</b></u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$253.95</b>
3.18	Nonpriority creditor's name and mailing address <b>Center for Teaching &amp; Learning</b> <b>119 Cross Point Road</b> <b>Edgecomb, ME 04556</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u><b>Seminars</b></u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$212.00</b>
3.19	Nonpriority creditor's name and mailing address <b>City of Mesa</b> <b>P.O. Box 1466</b> <b>Mesa, AZ 85211</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u><b>Field Trip</b></u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$508.00</b>
3.20	Nonpriority creditor's name and mailing address <b>City of Phoenix</b> <b>251 West Washington St., 3rd Floor</b> <b>Phoenix, AZ 85003</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u><b>Bus passes</b></u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$20,042.50</b>
3.21	Nonpriority creditor's name and mailing address <b>Collett's</b> <b>5212 W. Camelback Road</b> <b>Glendale, AZ 85301</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u><b>Uniforms</b></u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$5,774.46</b>



Debtor **STARSHINE ACADEMY**  
Name

Case number (if known)

3.22	Nonpriority creditor's name and mailing address <b>Compass Security LLC</b> <b>3941 E. Chandler Blvd, Ste. 106#169</b> <b>Phoenix, AZ 85048</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Security</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$105.00</b>
3.23	Nonpriority creditor's name and mailing address <b>Cox Communications</b> <b>P.O Box 78071</b> <b>Phoenix, AZ 85062</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,499.39</b>
3.24	Nonpriority creditor's name and mailing address <b>Creighton Transportation</b> <b>Transportation Dept.</b> <b>2802 E. McDowell Road</b> <b>Phoenix, AZ 85008</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Bus Rental</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$137.30</b>
3.25	Nonpriority creditor's name and mailing address <b>Crystal Price</b> <b>c/o Nicholas Enoch</b> <b>349 N. 4th Avenue</b> <b>Phoenix, AZ 85003</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Judgment</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Unknown</b>
3.26	Nonpriority creditor's name and mailing address <b>Dan Ciskal</b> <b>c/o Nicholas Enoch</b> <b>349 N. 4th Avenue</b> <b>Phoenix, AZ 85003</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Judgment</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Unknown</b>
3.27	Nonpriority creditor's name and mailing address <b>Davitta Hernandez</b> <b>c/o Nicholas Enoch</b> <b>349 N. 4th Avenue</b> <b>Phoenix, AZ 85003</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Judgment</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Unknown</b>
3.28	Nonpriority creditor's name and mailing address <b>Developmental Studies Center</b> <b>1250 53rd Street, Ste. 3</b> <b>Emeryville, CA 94608</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Seminars</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$2,662.20</b>

Debtor **STARSHINE ACADEMY**  
Name

Case number (if known)

3.29	Nonpriority creditor's name and mailing address <b>Divine Transportation in Phoenix</b> <b>1243 S. 7th Street</b> <b>Phoenix, AZ 85034</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Transportation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$300.00</b>
3.30	Nonpriority creditor's name and mailing address <b>Easy Grammer Systems</b> <b>P.O. Box 25970</b> <b>Scottsdale, AZ 85255</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Learning System</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$326.45</b>
3.31	Nonpriority creditor's name and mailing address <b>Edmentum</b> <b>5600 West 83rd Steet</b> <b>Suite 300, 8200 Tower</b> <b>Bloomington, MN 55437</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Testing</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$4,950.24</b>
3.32	Nonpriority creditor's name and mailing address <b>EMP Management</b> <b>20701 N. Scottsdale Rd., #107-233</b> <b>Scottsdale, AZ 85255</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Event Planning</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$9,000.00</b>
3.33	Nonpriority creditor's name and mailing address <b>Event Smart</b> <b>7511 W. Kimberly Way</b> <b>Glendale, AZ 85308</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Lighting</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$2,875.00</b>
3.34	Nonpriority creditor's name and mailing address <b>FearlessFlight Inc.</b> <b>3116 S. Mill Avenue, Ste. 173</b> <b>Tempe, AZ 85282</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Testing</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$758.86</b>
3.35	Nonpriority creditor's name and mailing address <b>Food Service Warehouse</b> <b>84 Inverness Circle East</b> <b>Englewood, CO 80112</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$15,133.58</b>

Name

3.36	Nonpriority creditor's name and mailing address <b>Genesis I; 1 Services</b> <b>3025 Yale St.</b> <b>Phoenix, AZ 85008</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Janitorial</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$24,310.66</u>
3.37	Nonpriority creditor's name and mailing address <b>GroupCast LLC</b> <b>718 University Avenue</b> <b>Los Gatos, CA 95032</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Online System</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$795.00</u>
3.38	Nonpriority creditor's name and mailing address <b>H J Trophies &amp; Awards Inc.</b> <b>3414 E. Thomas Road</b> <b>Phoenix, AZ 85018</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trophies</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$393.90</u>
3.39	Nonpriority creditor's name and mailing address <b>Healthnet Life Ins. Co.</b> <b>P.O. Box 70061</b> <b>Los Angeles, CA 90074</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Insurance</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$5,636.36</u>
3.40	Nonpriority creditor's name and mailing address <b>Holcomb &amp; Shreeve, P.C.</b> <b>3050 E. Irwin Avenue</b> <b>Mesa, AZ 85204</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Accounting</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$5,875.00</u>
3.41	Nonpriority creditor's name and mailing address <b>Integrated Education Services</b> <b>21639 N. 12th Avenue, #204</b> <b>Phoenix, AZ 85027</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Cirriculum</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$300.00</u>
3.42	Nonpriority creditor's name and mailing address <b>Janet Rogers</b> <b>c/o Nicholas Enoch</b> <b>349 N. 4th Avenue</b> <b>Phoenix, AZ 85003</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Judgment</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>Unknown</u>

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3.43	Nonpriority creditor's name and mailing address <b>JC Printing</b> 4029 N. 32nd Street Phoenix, AZ 85018 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Printing</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$487.95</b>
3.44	Nonpriority creditor's name and mailing address <b>John Wiley &amp; Sons Inc.</b> 740 Walt Whitman Road Melville, NY 11747 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Text Books</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$352.14</b>
3.45	Nonpriority creditor's name and mailing address <b>Kansas State Bank</b> P.O. Box 69 Manhattan, KS 66505 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Lease of Tablets</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Unknown</b>
3.46	Nonpriority creditor's name and mailing address <b>KB Property Maintenance LLC</b> 5903 W. Michigan Avenue Glendale, AZ 85308 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Janitorial</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$11,000.00</b>
3.47	Nonpriority creditor's name and mailing address <b>Laura Nagle</b> c/o Nicholas Enoch 349 N. 4th Avenue Phoenix, AZ 85003 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Judgment</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Unknown</b>
3.48	Nonpriority creditor's name and mailing address <b>Learning A to Z</b> 1840 East River Road, #320 Tucson, AZ 85718 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Cirriculum</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$545.04</b>
3.49	Nonpriority creditor's name and mailing address <b>Learning Solutions Inc.</b> 15434 N. 180th Ct. Surprise, AZ 85388 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Special Education Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$10,000.00</b>

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3.50	Nonpriority creditor's name and mailing address <b>Leonidas G. Condos, P.C.</b> <b>1820 E. Ray Road</b> <b>Chandler, AZ 85225</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Legal</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$30,342.00</b>
3.51	Nonpriority creditor's name and mailing address <b>Linda Harold</b> <b>P.O. Box 4182</b> <b>Scottsdale, AZ 85261</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Consultant</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$3,600.00</b>
3.52	Nonpriority creditor's name and mailing address <b>Maria Murillo</b> <b>c/o Nicholas Enoch</b> <b>349 N. 4th Avenue</b> <b>Phoenix, AZ 85003</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Judgment</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Unknown</b>
3.53	Nonpriority creditor's name and mailing address <b>Maricopa County Education Service Agency</b> <b>4041 N. Central Avenue, #1200</b> <b>Phoenix, AZ 85012</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Seminars</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$4,435.00</b>
3.54	Nonpriority creditor's name and mailing address <b>Mariposa Landscaping Arizona Inc.</b> <b>15529 Arrow Highway</b> <b>Irwindale, CA 91706</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Landscaping</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$16,711.49</b>
3.55	Nonpriority creditor's name and mailing address <b>MAS Educational Services, LLC</b> <b>6438 W. Cavedale Dr.</b> <b>Phoenix, AZ 85083</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Consultant</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$5,500.00</b>
3.56	Nonpriority creditor's name and mailing address <b>Math-U-See Inc.</b> <b>P.O. Box 8888</b> <b>Lancaster, PA 17604</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Education Program</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$14,379.22</b>

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3.57	Nonpriority creditor's name and mailing address <b>Maverick Education</b> <b>4725 East Charleston Avenue</b> <b>Phoenix, AZ 85032</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Consultant</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$4,480.00</b>
3.58	Nonpriority creditor's name and mailing address <b>MediaNet Solutions Inc.</b> <b>P.O. Box 10715</b> <b>Glendale, AZ 85318</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,195.00</b>
3.59	Nonpriority creditor's name and mailing address <b>Newsletter Pro</b> <b>9941 W. Emerald St.</b> <b>Boise, ID 83704</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Printing</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$2,571.48</b>
3.60	Nonpriority creditor's name and mailing address <b>Observe4success</b> <b>1911 Tyrone Blvd.</b> <b>Saint Petersburg, FL 33710</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Online Evaluations</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,800.00</b>
3.61	Nonpriority creditor's name and mailing address <b>OTIS</b> <b>1 Farm Springs Road</b> <b>Farmington, CT 06032</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Warranty</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$635.84</b>
3.62	Nonpriority creditor's name and mailing address <b>Pacific Office Automation</b> <b>1305 W. 1st Street</b> <b>Tempe, AZ 85281</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Lease of Copier</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Unknown</b>
3.63	Nonpriority creditor's name and mailing address <b>Patricia Smith</b> <b>c/o Nicholas Enoch</b> <b>349 N. 4th Avenue</b> <b>Phoenix, AZ 85003</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Judgment</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Unknown</b>

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3.64	Nonpriority creditor's name and mailing address <b>Pearson Education</b> <b>P.O. Box 409496</b> <b>Atlanta, GA 30384</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u><b>Cirriculum</b></u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$300.00</b>
3.65	Nonpriority creditor's name and mailing address <b>Phoenix Business Journal</b> <b>101 North First Avenue, Ste. 2300</b> <b>Phoenix, AZ 85003</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u><b>Advertising</b></u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$3,100.00</b>
3.66	Nonpriority creditor's name and mailing address <b>Phoenix Chamber of Commerce</b> <b>201 North Central Ave., 27th Floor</b> <b>Phoenix, AZ 85004</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u><b>Dues</b></u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$2,600.00</b>
3.67	Nonpriority creditor's name and mailing address <b>Release The Fear Inc.</b> <b>P.O. Box 3815</b> <b>Phoenix, AZ 85030</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u><b>Services</b></u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$850.00</b>
3.68	Nonpriority creditor's name and mailing address <b>Renaissance Learning</b> <b>P.O. Box 8036</b> <b>Wisconsin Rapids, WI 54495</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u><b>Educational Program</b></u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,688.39</b>
3.69	Nonpriority creditor's name and mailing address <b>Rene Hecht</b> <b>c/o Nicholas Enoch</b> <b>349 N. 4th Avenue</b> <b>Phoenix, AZ 85004</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u><b>Judgment</b></u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Unknown</b>
3.70	Nonpriority creditor's name and mailing address <b>School Pointe</b> <b>(formerly Index Blue)</b> <b>3248 West Henderson Rd.</b> <b>Columbus, OH 43220</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u><b>Website</b></u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$5,650.00</b>

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3.71	Nonpriority creditor's name and mailing address <b>Secure Care Dement</b> P.O. Box 29697 Phoenix, AZ 85038 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Insurance</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$638.05</b>
3.72	Nonpriority creditor's name and mailing address <b>Serious Planning for Ed. Dev.</b> P.O. Box 72205 Phoenix, AZ 85050 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Consultant</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$4,600.00</b>
3.73	Nonpriority creditor's name and mailing address <b>SHI</b> 290 Davidson Avenue Somerset, NJ 08873 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Educational</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$3,634.01</b>
3.74	Nonpriority creditor's name and mailing address <b>Shindler Elevator Corporation</b> 8270 S. Kyrene Rd., Ste. 110 Tempe, AZ 85284 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,846.32</b>
3.75	Nonpriority creditor's name and mailing address <b>Signal One</b> 6100 Sout Maple Avenue, Ste 118 Tempe, AZ 85283 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Alarm</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$645.00</b>
3.76	Nonpriority creditor's name and mailing address <b>Solution Tree</b> 555 North Morton Street Bloomington, IN 47404 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Seminars</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$2,596.00</b>
3.77	Nonpriority creditor's name and mailing address <b>Staples</b> Dept LA 1368 P.O. Box 83689 Chicago, IL 60696 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Office Supplies</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,972.39</b>



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3.78 Nonpriority creditor's name and mailing address

**Steps**

131 E. Secretariat Dr.  
Tempe, AZ 85284

Date(s) debt was incurred

Last 4 digits of account number

As of the petition filing date, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: Special Education Services

Is the claim subject to offset? ☒ No ☐ Yes

**\$5,950.00**

3.79 Nonpriority creditor's name and mailing address

Tammilyn Gee  
8935 W. Ocotillo  
Glendale, AZ 85305

Date(s) debt was incurred

Last 4 digits of account number

As of the petition filing date, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: Services

Is the claim subject to offset? ☒ No ☐ Yes

**\$1,235.00**

3.80 Nonpriority creditor's name and mailing address

Teacher-Teachers.com  
120 S. Central Avenue, Ste. 1000  
Saint Louis, MO 63105

Date(s) debt was incurred

Last 4 digits of account number

As of the petition filing date, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: Product

Is the claim subject to offset? ☒ No ☐ Yes

**\$950.00**

3.81 Nonpriority creditor's name and mailing address

Travelers  
Travelers CL Remittance Center  
P.O. Box 660317  
Dallas, TX 75266

Date(s) debt was incurred

Last 4 digits of account number

As of the petition filing date, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: Insurance

Is the claim subject to offset? ☒ No ☐ Yes

**\$1,061.00**

**Part 3: List Others to Be Notified About Unsecured Claims**

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

Name and mailing address

On which line in Part 1 or Part 2 is the  
related creditor (if any) listed?

Last 4 digits of  
account number, if  
any

**Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims**

5. Add the amounts of priority and nonpriority unsecured claims.

5a. Total claims from Part 1

5b. Total claims from Part 2

5c. Total of Parts 1 and 2

Lines 5a + 5b = 5c.

Total of claim amounts  
5a. \$ **80,000.00**  
5b. + \$ **330,479.90**

5c. \$ **410,479.90**